Fill in this info	rmation to identify your	case:		
Debtor 1	Carl Augustine			
	First Name	Middle Name	Last Name	
Debtor 2	Cara Augustine			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN	
Case number	21-48251-mar			
(if known)				☐ Check if this is an
				amended filing
J				 ű

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	125,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,712.67
	1c. Copy line 63, Total of all property on Schedule A/B	\$	149,712.67
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	112,059.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	4,329.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	76,896.89
	Your total liabilities	\$	193,284.89
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,650.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,650.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Case number (if known) 21-48251-mar

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,505.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,329.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	20,093.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	24,422.00

County	enaw			At least or	only and Debtor 2 only ne of the debtors a on you wish to ad cation number:		(see instruc	ctions)	nunity property
			☐ Timeshare ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only			Describe the nature of your ownership interes (such as fee simple, tenancy by the entireties, a life estate), if known. Deed			
City	State	ZIP Code		Investmen				000.00	\$125,000.00
Ypsilaı	nti MI	48197-0000			red or mobile hon		Current value entire propert		Current value of the portion you own?
Street add	ess, if available, or other desc	cription		•	multi-unit building	•		claims on Schedule D: s Secured by Property.	
1.1 546 El d			What	is the prop	perty? Check all that nily home	apply	Do not deduct	secured clair	ns or exemptions. Put
■ Yes	. Where is the property?								
_	or have any legal or equ	uitable interest in a	ny reside	ence, build	ing, land, or simi	lar property?			
Part 1: Descr	ibe Each Residence, Bu	uilding, Land, or Otl	her Real	Estate You	Own or Have an	Interest In			
hink it fits bes	ry, separately list and de t. Be as complete and a more space is needed, a juestion.	ccurate as possible	e. If two	married pe	ople are filing to	gether, both are	equally respons	sible for sup	plying correct
	ule A/B: Pr				Maria de Cart		Part I		12/15
	orm 106A/B	-							
Case number	21-48251-mar							[Check if this is an amended filing
United States	Bankruptcy Court for	the: EASTERN	DISTRI	CT OF MIC	CHIGAN				
(Spouse, if filing)	First Name		Name		Last Name				
Debtor 2	First Name Cara August		Name		Last Name				
	Carl Augusti	ne							
Debtor 1	Carl Augusti	no							

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debte Debte		arl August ara Augus			Case number (if known)	21-48251-mar
3. Ca	rs, vans	, trucks, trac	tors, sport utility ve	chicles, motorcycles		
	No					
■ ,	Yes					
3.1				Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on <i>Schedule D</i> :
	Model:	Altima		Debtor 1 only		ve Claims Secured by Property.
	Year:	2014	444 000	Debtor 2 only	Current value of t	
		mate mileage:	111,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		At least one of the debtors and another		
				Check if this is community property (see instructions)	\$8,500	9.00 \$8,500.00
3.2	Make:	Chevy		Who has an interest in the property? Check one		ured claims or exemptions. Put
0.2	Model:	Tahoe		Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2009		Debtor 2 only		
	Approxi	mate mileage:	164,000	■ Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
	Other in	formation:		☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$3,500	3,500.00
3.3	Make:	Chevy		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Tahoe		☐ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2001		Debtor 2 only	Current value of t	the Current value of the
	Approxi	mate mileage:	230,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		\square At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$1,300	\$1,300.00
Exa ■ I	amples: E			nd other recreational vehicles, other vehicles atercraft, fishing vessels, snowmobiles, motorcy		
				rn for all of your entries from Part 2, includin that number here		\$13,300.00
Part 3	Descri	be Your Perso	onal and Household It	ems		
Do y	ou own	or have any l	legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E>	<i>kamples:</i> No	goods and to Major appliar escribe	furnishings nces, furniture, linens	s, china, kitchenware		
	res. De	escride				
			Household furn	ishings		\$3,000.00

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1 Debtor 2	Carl Augusti Cara August		(if known)	21-48251-mar
□ No	nples: Televisions a including cell	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners phones, cameras, media players, games	rs; music co	ollections; electronic devices
		TV, printer		\$700.00
Exam ■ No	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stans, memorabilia, collectibles	amp, coin,	or baseball card collections;
Exam	musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	s; canoes a	nd kayaks; carpentry tools;
		Keyboard		\$300.00
□ No	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment	_	
		Firearm		\$150.00
□ No	mples: Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories		
		Wardrobe		\$2,000.00
☐ No	mples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watche	es, gems, go	
		Jewelry		\$20.00
Exal	farm animals mples: Dogs, cats, s. Describe	pirds, horses		
		(2) dogs, (1) cat		\$200.00
■ No	-	d household items you did not already list, including any health aids you did i	not list	

Official Form 106A/B Schedule A/B: Property page 3

De	btor 1	Carl August	ine			
	btor 2	Cara August			Case number (if known)	21-48251-mar
15					, including any entries for pages you have attached	\$6,370.00
		cribe Your Finan				
Do	you ow	n or have any l	egal or e	quitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No			our wallet, in your home,	in a safe deposit box, and on hand when you file your petiti	on
	Exampi □ No				; certificates of deposit; shares in credit unions, brokerage the same institution, list each. Institution name:	nouses, and other similar
			17.1.	Checking & savings accounts	Key Bank	\$600.00
				Checking, joint account w/		
			17.2.	daughter	Key Bank	\$76.33
			17.3.	Checking, joint account w/ son	Key Bank-Son's scholarship money from Wayne State that he uses to live on	\$2,000.00
			17.4.	Checking, joint account w/ daughter	Key Bank	\$450.29
				daugiitei	-	
			17.5.	Savings	University of Michigan Credit Union	\$10.00
	Examp			ly traded stocks ent accounts with brokera	ge firms, money market accounts	
	■ No			Institution or issues see-	2	
	⊔ Yes		=	Institution or issuer name	3 .	
	Non-pul joint ve		ock and	interests in incorporate	ed and unincorporated businesses, including an interes	et in an LLC, partnership, and

20. **Government and corporate bonds and other negotiable and non-negotiable instruments** *Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

 $\hfill\square$ Yes. Give specific information about them

☐ Yes. Give specific information about them.....

Issuer name:

Name of entity:

page 4 Official Form 106A/B Schedule A/B: Property

% of ownership:

Debtor 1 Debtor 2	Carl Augustine Cara Augustine		Case number (if known)	21-48251-mar
	ment or pension accounts		rings accounts, or other pension or profit-sharing	plans
	List each account separate Type of	-	on name:	
	IRA	_Morgar	n Stanley	\$819.17
	401(k) <u>Empo</u> w	ver	\$509.62
	IRA	Americ	can Century Investments	\$576.26
Your s Exam ■ No		s you have made so that you may o lords, prepaid rent, public utilities (6	continue service or use from a company electric, gas, water), telecommunications compar on name or individual:	nies, or others
23. Annui ■ No □ Yes.		lic payment of money to you, either e and description.	r for life or for a number of years)	
	.C. §§ 530(b)(1), 529A(b), a	and 529(b)(1).	program, or under a qualified state tuition program to the records of any interests.11 U.S.C. § 521(c):	
■ No	-		hing listed in line 1), and rights or powers exe	ercisable for your benefit
☐ Yes.	Give specific information a	about them		-
Exam ■ No	ts, copyrights, trademarks ples: Internet domain name Give specific information a	s, trade secrets, and other intelle s, websites, proceeds from royaltie about them	ectual property es and licensing agreements	
Exam ■ No	ses, franchises, and other ples: Building permits, exclu	usive licenses, cooperative associa	ation holdings, liquor licenses, professional licens	es
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 5

claims or exemptions.

	btor 1 btor 2	Carl Augustine Cara Augustine		Case number (if kno	wn) 21-48251-mar
28.	Tax ref	unds owed to you			
	■ No	O'	the second sector of the second sector secto	b. Clad the continues and the territories	
	→ Yes.	Give specific information about	tnem, including whether you alread	ly filed the returns and the tax years	
29.	•	support les: Past due or lump sum alim	ony, spousal support, child support	, maintenance, divorce settlement, prop	erty settlement
	No				
		Give specific information			
30.		mounts someone owes you les: Unpaid wages, disability in	surance payments, disability benefi	ts, sick pay, vacation pay, workers' con	npensation. Social Security
	_	benefits; unpaid loans you			
	■ No	Give specific information			
	_ 165.	Give specific information			
					·
31.		ts in insurance policies			
	<i>Examp</i> ⊐ No	les: Health, disability, or life ins	surance; health savings account (HS	SA); credit, homeowner's, or renter's ins	urance
		Name the insurance company	of each policy and list its value.		
		Compan		Beneficiary:	Surrender or refund value:
		TransA	merica	wife	\$1.00
32.	If you a	erest in property that is due are the beneficiary of a living true has died.	you from someone who has died ast, expect proceeds from a life insu	rance policy, or are currently entitled to	receive property because
	■ No				
I	☐ Yes.	Give specific information			
	Examp		er or not you have filed a lawsuit of putes, insurance claims, or rights to		
	■ No	Describe each alaim			
	→ Yes.	Describe each claim			
	Other o	contingent and unliquidated o	claims of every nature, including	counterclaims of the debtor and right	s to set off claims
		Describe each claim			
		ancial assets you did not alre	eady list		
	■ No	Give specific information			
	_ 1€5.	Oive specific initinitiation			

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1 Debtor 2	Carl Augusti Cara Augusti		Case number (if known)	21-48251-mar
		f all of your entries from Part 4, including any entries for pages umber here		\$5,042.67
Part 5: De	escribe Any Busines	ss-Related Property You Own or Have an Interest In. List any real estate	in Part 1.	
	-	gal or equitable interest in any business-related property?		
	o to Part 6.			
☐ Yes. (Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accou	ınts receivable or	commissions you already earned		
□ No □ Yes.	Describe			
		shings, and supplies ated computers, software, modems, printers, copiers, fax machines	, rugs, telephones, desks,	chairs, electronic devices
□ No □ Yes.	Describe			
40. Machi i	nery, fixtures, eq	uipment, supplies you use in business, and tools of your trade		
□ No □ Yes.	Describe			
41. Inven	tory			
□ No □ Yes.	Describe			
42. Interes	sts in partnership	s or joint ventures		
□ No □ Yes.	Give specific info	rmation about them Name of entity:	% of ownership:	
		, ,	%	
43. Custo i	mer lists, mailing	lists, or other compilations		
□ Do yo	ur lists include per	sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	□ No □ Yes. Describe			
44. Any b ı	usiness-related p	roperty you did not already list		
□ No □ Yes.	Give specific info	mation		

Schedule A/B: Property page 7 Official Form 106A/B

Debtor 1 Debtor 2	Carl Augustin Cara Augustii	ne Case num	nber (if known)	21-48251-mar
		all of your entries from Part 5, including any entries for pages you have umber here		
		nd Commercial Fishing-Related Property You Own or Have an Interest In. terest in farmland, list it in Part 1.		
	u own or have any . Go to Part 7.	legal or equitable interest in any farm- or commercial fishing-related pro	operty?	
☐ Yes	s. Go to line 47.			Current value of the portion you own? Do not deduct secured claims or exemptions.
17. Farm a Exam		ultry, farm-raised fish		
□ No □ Yes.				
8. Crops	either growing	or harvested		
□ No □ Yes.	. Give specific inform	mation		
□ No	and fishing equipr	nent, implements, machinery, fixtures, and tools of trade		
60 Farm a	and fishing suppli	es, chemicals, and feed		
□ No				
51 Anv fa	arm- and commerc	ial fishing-related property you did not already list		
□ No	. Give specific infor			
	[
		f all of your entries from Part 6, including any entries for pages you have umber here		
Part 7:	Describe All Prop	erty You Own or Have an Interest in That You Did Not List Above	'	

Official Form 106A/B Schedule A/B: Property page 8

	otor 2 Cara Augustine Cara Augustine		Case number (if known)	21-48251-mar
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$125,000.00
56.	Part 2: Total vehicles, line 5	\$13,300.00		
57.	Part 3: Total personal and household items, line 15	\$6,370.00		
58.	Part 4: Total financial assets, line 36	\$5,042.67		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$24,712.67	Copy personal property to	stal \$24,712.67
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$149,712.67

Fill in this inform				
Debtor 1	Carl Augustine			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN	
Case number 2	1-48251-mar			
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Рa	Identify the Property You Claim as E	exempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
D	ebtor 1 Exemptions				
<u> </u>	546 Elder St. Ypsilanti, MI 48197 Washtenaw County	\$125,000.00		\$12,967.00	11 U.S.C. § 522(d)(1)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2001 Chevy Tahoe 230,000 miles Line from Schedule A/B: 3.3	\$1,300.00		\$650.00	11 U.S.C. § 522(d)(2)
	Line Ironi Scriedule AVB. 3.3			100% of fair market value, up to any applicable statutory limit	
	Household furnishings Line from Schedule A/B: 6.1	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(3)
	Line Ironi Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit	
	TV, printer Line from Schedule A/B: 7.1	\$700.00		\$350.00	11 U.S.C. § 522(d)(3)
	Line Ironi Schedule AVB. 1.1			100% of fair market value, up to any applicable statutory limit	
	Keyboard Line from Schedule A/B: 9.1	\$300.00		\$150.00	11 U.S.C. § 522(d)(3)
	LINE HOIH SCHEUUIE PVD. 3.1			100% of fair market value, up to	

Carl Augustine Debtor 1 21-48251-mar **Cara Augustine** Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Firearm** 11 U.S.C. § 522(d)(3) \$150.00 \$150.00 Line from Schedule A/B: 10.1 100% of fair market value, up to any applicable statutory limit Wardrobe 11 U.S.C. § 522(d)(3) \$2,000.00 \$1,000.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Jewelry 11 U.S.C. § 522(d)(4) \$10.00 \$20.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit (2) dogs, (1) cat 11 U.S.C. § 522(d)(3) \$200.00 \$100.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Checking & savings accounts: Key 11 U.S.C. § 522(d)(5) \$300.00 \$600.00 Rank Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: University of Michigan 11 U.S.C. § 522(d)(5) \$5.00 \$10.00 **Credit Union** Line from Schedule A/B: 17.5 100% of fair market value, up to any applicable statutory limit **TransAmerica** 11 U.S.C. § 522(d)(7) \$1.00 \$1.00 Beneficiary: wife Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350 (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

			-						
Fill in this infor	Fill in this information to identify your case:								
Debtor 1									
	First Name	Middle Name	Last Name						
Debtor 2	Cara Augustine								
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		EASTERN DISTRICT O	OF MICHIGAN						
Case number	21-48251-mar								
(if known)	21 40201 mai				Check if this is an amended filing				

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)						
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	btor 2 Exemptions 546 Elder St. Ypsilanti, MI 48197	\$125,000.00		\$12,968.00	11 U.S.C. § 522(d)(1)			
	Washtenaw County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	2001 Chevy Tahoe 230,000 miles Line from Schedule A/B: 3.3	\$1,300.00		\$650.00	11 U.S.C. § 522(d)(2)			
	Line Holli Schedule A/L. 5.5			100% of fair market value, up to any applicable statutory limit				
	Household furnishings Line from Schedule A/B: 6.1	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(3)			
	Line Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit				
	TV, printer Line from Schedule A/B: 7.1	\$700.00		\$350.00	11 U.S.C. § 522(d)(3)			
	Line from Schedule AVB. 111			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

Carl Augustine Debtor 1 21-48251-mar **Cara Augustine** Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Keyboard 11 U.S.C. § 522(d)(5) \$300.00 \$150.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit Wardrobe 11 U.S.C. § 522(d)(3) \$1,000.00 \$2,000.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(4) Jewelry \$20.00 \$10.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit (2) dogs, (1) cat 11 U.S.C. § 522(d)(3) \$200.00 \$100.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Checking & savings accounts: Key 11 U.S.C. § 522(d)(5) \$600.00 \$300.00 Bank Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: University of Michigan 11 U.S.C. § 522(d)(5) \$10.00 \$5.00 Credit Union П Line from Schedule A/B: 17.5 100% of fair market value, up to any applicable statutory limit **IRA: Morgan Stanley** 11 U.S.C. § 522(d)(10)(E) \$819.17 100% Line from Schedule A/B: 21.1 П 100% of fair market value, up to any applicable statutory limit 401(k): Empower 11 U.S.C. § 522(d)(10)(E) 100% \$509.62 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit IRA: American Century Investments 11 U.S.C. § 522(d)(10)(E) \$576.26 100% Line from Schedule A/B: 21.3 П 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Official Form 106C

Yes

Fill in this inform	ation to identify you	r case:			
Debtor 1	Carl Augustine				
	First Name	Middle Name Last Name		-	
Debtor 2	Cara Augustine				
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ban	kruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN		-	
	1-48251-mar				
(if known)				_	t if this is an
				amen	ded filing
Official Form	106D				
		Who Llove Claims Cooured	by Droport		40/45
Schedule i	D: Creditors	Who Have Claims Secured	by Propert	<u>y </u>	12/15
		f two married people are filing together, both are equ out, number the entries, and attach it to this form. On			
1. Do any creditors h	nave claims secured by	your property?			
☐ No. Check	this box and submit th	nis form to the court with your other schedules. You	u have nothing else t	to report on this form.	
Yes. Fill in	all of the information I	pelow.			
	Secured Claims				
		nore than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, lis	t the claims in alphabetic	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Shellpoint		Describe the property that secures the claim:	\$99,065.00	\$125,000.00	\$0.00
Creditor's Name		546 Elder St. Ypsilanti, MI 48197 Washtenaw County	. ,		·
Attn: Bank	ruptcy	As of the date you file, the claim is: Check all that			
Po Box 108		apply.			
Greenville,	SC 29603	☐ Contingent			
Number, Street, 0	City, State & Zip Code	☐ Unliquidated			
	10.5	Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only			ıred		
Debtor 2 only		Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Deb	•				
☐ At least one of the	e debtors and another	Judgment lien from a lawsuit			
community deb		Other (including a right to offset) Mortgage			

6379

Last 4 digits of account number

Opened 05/19 Last

Date debt was incurred Active 08/21

Debtor 1 Carl Augustine		Case number (if known)	21-48251-mar	
First Name Middle N Debtor 2 Cara Augustine	ame Last Name			
First Name Middle N	ame Last Name			
University of Michigan	Describe the property that secures the claim:	\$8,770.00	\$8,500.00	\$270.00
Creditor's Name	2014 Nissan Altima 111,000 miles			
Attn: Bankruptcy 340 E Huron St, Ste 100 Ann Arbor, MI 48104 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or socar loan)	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Auto loan	<u> </u>		
Opened 01/17 Last Active 9/30/21	Last 4 digits of account number 0000			
University of Michigan	Describe the property that secures the claim:	\$4,224.00	\$3,500.00	\$724.00
Creditor's Name	2009 Chevy Tahoe 164,000 miles			
Attn: Bankruptcy 340 E Huron St, Ste 100 Ann Arbor, MI 48104	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	1		
Opened 03/18 Last Date debt was incurred Active 10/21	Last 4 digits of account number			
Add the dollar value of your entries in C If this is the last page of your form, add Write that number here:	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$112,059 \$112,059		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

					•	
Fill in this info	rmation to identify your case	e:				
Debtor 1	Carl Augustine					
	First Name	Middle Name L	ast Name			
Debtor 2 (Spouse if, filing)	Cara Augustine First Name	Middle Name L	ast Name			
(Spouse II, IIIIIIg)						
United States E	Bankruptcy Court for the: EA	ASTERN DISTRICT OF MICHIG	AN			
Case number (if known)	21-48251-mar				_	if this is an led filing
Official For	rm 106F/F					
		Have Unsecured Cl	laims			12/15
any executory co Schedule G: Exec Schedule D: Crec left. Attach the Co name and case n	entracts or unexpired leases that cutory Contracts and Unexpired ditors Who Have Claims Secured ontinuation Page to this page. If umber (if known).	rt 1 for creditors with PRIORITY cl could result in a claim. Also list e Leases (Official Form 106G). Do n by Property. If more space is need you have no information to report	executory contr ot include any d ded, copy the P	acts on Schedule A/B: I creditors with partially s art you need, fill it out,	Property (Official For secured claims that a number the entries i	m 106A/B) and on are listed in n the boxes on the
	All of Your PRIORITY Unsec					
	itors have priority unsecured cla	ims against you?				
☐ No. Go to ☐ Yes.	Part 2.					
identify what possible, list Part 1. If mor	type of claim it is. If a claim has bo the claims in alphabetical order acc e than one creditor holds a particul	creditor has more than one priority of the priority and nonpriority amounts, listording to the creditor's name. If you ar claim, list the other creditors in Pate instructions for this form in the instructions.	st that claim her have more than art 3.	e and show both priority a two priority unsecured cl	and nonpriority amoun aims, fill out the Conti	ts. As much as nuation Page of
				Total claim	Priority amount	Nonpriority amount
2.1 *IRS	Creditor's Name	Last 4 digits of account n	umber <u>6114</u>	\$4,329.00	\$4,329.00	\$0.00
PO Bo Philad	ox 7346 delphia, PA 19101-7346	When was the debt incurr		2018, 2019, 2020	-	
	Street City State Zip Code red the debt? Check one.	As of the date you file, the	e claim is: Chec	ck all that apply		
Debtor 1		☐ Contingent				
☐ Debtor 2	•	☐ Unliquidated				
	1 and Debtor 2 only	☐ Disputed Type of PRIORITY unsecu	ıred claim:			
	one of the debtors and another	☐ Domestic support obliga				
_	if this claim is for a community o	_		the government		
	n subject to offset?	☐ Claims for death or pers	•	•		
■ No		Other. Specify				
☐ Yes		Incor	ne Tax			
Part 2: List	All of Your NONPRIORITY U	nsecured Claims				
3. Do any cred	itors have nonpriority unsecured	l claims against you?				
☐ No. You h	nave nothing to report in this part. S	Submit this form to the court with you	r other schedule	S.		
Yes.						
unsecured cl	aim, list the creditor separately for	in the alphabetical order of the creach claim. For each claim listed, ide other creditors in Part 3.If you have	entify what type of	of claim it is. Do not list cl	aims already included	in Part 1. If more

Total claim

Part 2.

	1 Carl Augustine 2 Cara Augustine		Case number (if known)	21-48251-mar	
4.1	Capital One	Last 4 digits of account number	1258		\$2,445.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 05/15 Last 9/03/21	Active	
	Who incurred the debt? Check one.	П.			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured Student loans	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce the	hat you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar deb	its	
	Yes	Other. Specify Credit Card	d .		
4.2	Capital One	Last 4 digits of account number	9754		\$1,385.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 03/15 Last 09/21	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims		hat you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar deh	nts	
	Yes	Other. Specify Credit Card			
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	3480		\$648.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/16 Last 9/13/21	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce the	hat you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar deb	ots	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

Debtor Debtor	Carl Augustine Cara Augustine		Case number (if known)	21-48251-mar	
4.4	Capital One/Menards	Last 4 digits of account number	7813		\$2,009.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	Opened 11/16 Last 29/14/21 is: Check all that apply	Active	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify ☐ Charge Acc	aration agreement or divorce th		
4.5	Citibank/Best Buy	Last 4 digits of account number	8840		\$255.00
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 09/20 Last / 09/21	Active	·
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Charge Acc	d claim: aration agreement or divorce th ng plans, and other similar deb		
4.6	Citibank/Meijer Nonpriority Creditor's Name	Last 4 digits of account number	9646		\$950.00
	Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 11/18 Last 29/03/21	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s. Uneck all that apply		
	□ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separation.		nat you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar deb	ts	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Charge Account

	r 1 Carl Augustine r 2 Cara Augustine		Case number (if known) 21-48251-ma	r
4.7	Citibank/The Home Depot Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St.L. ouic. MO 62170	Last 4 digits of account number When was the debt incurred?	4335 Opened 10/18 Last Active 09/21	\$5,142.00
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
	Yes	■ Other. Specify Charge Acc		
4.8	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	7699	\$56.00
	Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 05/21 Last Active 09/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecure	d claim:	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	,	
	■ No □ Yes	Other. Specify Charge Acc		
4.9	Comenity Bkl/Ulta Nonpriority Creditor's Name	Last 4 digits of account number	6958	\$385.00
	Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 12/17 Last Active 09/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separations.		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	- ·	
	☐ Yes	■ Other. Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

r 2 Cara Augustine		Case number (if known) 21-48251-mar	
Credit First National Association	Last 4 digits of account number	8142	\$1,286.
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181	When was the debt incurred?	Opened 11/13 Last Active 9/03/21	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharir	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Credit One Bank	Last 4 digits of account number	4871	\$1,445.
Nonpriority Creditor's Name Attn: Bankruptcy Department	Last 4 digits of account number	Opened 07/18 Last Active	Ψί,ττο
Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	09/21	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
KeyBank	Last 4 digits of account number	4662	\$5,095.
Nonpriority Creditor's Name Attn: Bankruptcy Oh-01-51-0622 4910 Tiedman Rd. Brooklyn, OH 44144	When was the debt incurred?	Opened 02/18 Last Active	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		

debt

■ No

☐ Yes

Is the claim subject to offset?

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

	or 1 Carl Augustine or 2 Cara Augustine		Case number (if known) 21-48251-mar	
4.1 3	Lendclub Bnk	Last 4 digits of account number	8289	\$4,085.00
	Nonpriority Creditor's Name Attn: Bankruptcy 595 Market Street, Suite 200 San Francisco, CA 94105	When was the debt incurred?	Opened 03/20 Last Active 08/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	u Claini.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.1	Lendclub Bnk	Last 4 digits of account number	5606	\$1,465.00
	Nonpriority Creditor's Name Attn: Bankruptcy 595 Market Street, Suite 200	When was the debt incurred?	Opened 06/21 Last Active 08/21	. ,
	San Francisco, CA 94105 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.1 5	Lendclub Bnk	Last 4 digits of account number	2693	\$431.00
	Nonpriority Creditor's Name Attn: Bankruptcy 595 Market Street, Suite 200 San Francisco, CA 94105	When was the debt incurred?	Opened 04/19 Last Active 08/21	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		

debt

■ No

☐ Yes

Is the claim subject to offset?

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Unsecured

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

	or 1 Carl Augustine or 2 Cara Augustine		Case number (if known) 21-48251-m	ar			
4.1 6	Mercury/FBT	Last 4 digits of account number	0196	\$5,771.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 84064 Columbus, GA 31908	When was the debt incurred?	Opened 06/12 Last Active 9/07/21				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	ration agreement or divorce that you did not				
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card					
4.1	MOHELA	Last 4 digits of account number	0003	\$8,272.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	Opened 10/22/19 Last Active 9/01/21				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only						
	■ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt	Student loansObligations arising out of a separation	ration agreement or divorce that you did not				
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	g plans, and other similar debts				
	Yes	Other. Specify					
		Educationa	l				
4.1 8	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$7,157.00			
	Attn: Bankruptcy 633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	Opened 9/22/18 Last Active 9/01/21				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:				
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					

Schedule E/F: Creditors Who Have Unsecured Claims

Educational

Cara Augustine		Case number (if known) 21-48251-mar	
MOHELA	Last 4 digits of account number	0001	\$4,6
Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	Opened 9/01/17 Last Active 9/01/21	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	■ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify		
	Educationa	 al	
Nordstrom FSB	Last 4 digits of account number	3580	\$8
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6555 Englewood, CO 80155	When was the debt incurred?	Opened 08/19 Last Active 9/05/21	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	<u> </u>	
Public Service Credit Union		8390	\$1,6
Nonpriority Creditor's Name	Last 4 digits of account number		φ1,0
Cardmember Service PO Box 6335	When was the debt incurred?	8/21	
Fargo, ND 58125-6335		_	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	-		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		

debt

■ No □ Yes

lacksquare At least one of the debtors and another

Is the claim subject to offset?

 $\hfill\Box$ Check if this claim is for a community

Schedule E/F: Creditors Who Have Unsecured Claims

Type of NONPRIORITY unsecured claim:

■ Other. Specify credit card purchases

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

 \square Student loans

report as priority claims

Debte Debte	or 1 Carl Augustine or 2 Cara Augustine		Case number (if known) 21-48251-mar				
4.2 2	Synchrony Bank/ Old Navy	Last 4 digits of account number	2487	\$452.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/19 Last Active 9/19/21				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes ☐ Other. Specify Charge Account						
4.2	Synchrony Bank/Amazon	Last 4 digits of account number	1190	\$914.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 01/21 Last Active 09/21				
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.2 4	Synchrony Bank/Care Credit	Last 4 digits of account number	8866	\$4,287.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 04/16 Last Active 9/14/21				
	Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	<u>-</u>	• • •				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Charles I acces					

debt

■ No
□ Yes

Is the claim subject to offset?

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Charge Account

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

		Case number (if known) 21-48251-mar	
Synchrony Bank/Care Credit	Last 4 digits of account number	4073	\$1,0
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 02/21 Last Active 9/14/21	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt ls the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Account		
Synchrony Bank/Sams	Last 4 digits of account number	3256	\$4
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 03/20 Last Active 9/07/21	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Synchrony/American Eagle	Last 4 digits of account number	7925	\$1
Nonpriority Creditor's Name			Ψ
Attn: Bankruptcy		Opened 05/18 Last Active	
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	9/10/21	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• • •		
Debtor 1 only	☐ Contingent		
•			

debt

■ No

☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Disputed

☐ Student loans

Type of NONPRIORITY unsecured claim:

■ Other. Specify Charge Account

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

ebto	or 2 Cara Augustine		Case number (if known) 21-48251-mar	
2	Target	Last 4 digits of account number	0617	\$485.0
	Nonpriority Creditor's Name c/o Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 08/20 Last Active 09/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only			
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	u ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u>1</u>	
2	U.S. Bancorp	Last 4 digits of account number	8390	\$1,634.0
	Nonpriority Creditor's Name Attn: Bankruptcy 800 Nicollet Mall	When was the debt incurred?	Opened 08/17 Last Active 9/14/21	
	Minneapolis, MN 55402 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	13. Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
3	University of Michigan CU	Last 4 digits of account number	0001	\$12,103.0
_	Nonpriority Creditor's Name Attn: Bankruptcy 340 E Huron St, Ste 100 Ann Arbor, MI 48104	When was the debt incurred?	Opened 11/17 Last Active 07/21	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	

Part 3: List Others to Be Notified About a Debt That You Already Listed

☐ Check if this claim is for a community

Is the claim subject to offset?

Official Form 106 E/F

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Unsecured

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

Debtor 1 Carl Augustine 21-48251-mar Debtor 2 Cara Augustine Case number (if known)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address **US Attorney Civil Division** 211 Fort Street, Suite 2300 Detroit, MI 48226

On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one):

■ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 4,329.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 4,329.00
				Total Claim
Γotal	6f.	Student loans	6f.	\$ 20,093.00
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 56,803.89
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 76,896.89

Official Form 106 E/F

Fill in this infor					
Debtor 1	Carl Augustine				
	First Name	Middle Name	Last Name	_	
Debtor 2	Cara Augustine				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF MICHIGAN		
Case number	21-48251-mar				
(if known)					☐ Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	i erson or	Name, Number	, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Fill in this in	formation to identify your	case:			
Debtor 1	Carl Augustine				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Cara Augustine First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	Filst Name				
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case number	21-48251-mar				
(if known)					Check if this is an amended filing
Official F	Form 106H				
	le H: Your Cod	obtore			40/45
Scriedu	ie n. Tour Cou	enioi s			12/15
ill it out, and our name an		boxes on the left. Attach . Answer every question.	the Additional Page to t	this page. On the top of	ded, copy the Additional Page, fany Additional Pages, write
=					
■ No □ Yes					
□ res					
	t he last 8 years, have you California, Idaho, Louisiana				ates and territories include
_	to line 3.	una ar lagal aguir alant liva	with you at the time?		
☐ Yes. D	id your spouse, former spo	use, or legal equivalent live	with you at the time?		
	No				
Ц	Yes.				
	In which community stat	e or territory did you live?		Fill in the name and o	current address of that person.
	City	State	Zip Code		
	City	State	Zip Code		
in line 2 Form 100 out Colu	again as a codebtor only i 6D), Schedule E/F (Officia	if that person is a guarant I Form 106E/F), or Schedu	tor or cosigner. Make su	re you have listed the co. G). Use Schedule D, Schedu	ith you. List the person shown creditor on Schedule D (Official nedule E/F, or Schedule G to fil or to whom you owe the debt
Nam	ne, Number, Street, City, State and Z	IP Code		Check all schedules the	nat apply:
3.1				☐ Schedule D, line	
Nar	ne			☐ Schedule E/F, line	
				☐ Schedule G, line	
Nur	nber Street				
City		State	ZIP Code		
3.2				☐ Schedule D, line	
Nar	II U			☐ Schedule E/F, line	
				☐ Schedule G, line	
	nber Street	Otata	710.0		
City		State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1
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Fill in this informati	ion to identify your case:	
Debtor 1	Carl Augustine	
Debtor 2 (Spouse, if filing)	Cara Augustine	
United States Bank	kruptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number	21-48251-mar	Check if this is:
(If known)		☐ An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official For	<u>m 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/15
Be as complete an	nd accurate as possible. If two married people are filing together (D information. If you are married and not filing jointly, and your spou	, , , ,

spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1E Describe Employment				
		Debtor 1	Debtor 2 or non-filing spouse	
	Empleyment status	■ Employed	■ Employed	
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed	
employers.	Occupation	Truck Driver	Sewer	
Include part-time, seasonal, or self-employed work.	Employer's name	Cottage Inn Distribution Inc.	Extang Corporation	
Occupation may include student or homemaker, if it applies.	Employer's address	4390 Concourse Dr. Ann Arbor, MI 48108	5400 S. State Rd. Ann Arbor, MI 48108	
	How long employed th	nere? 21 years	4 months	
	information about additional employers. Include part-time, seasonal, or self-employed work.	information. If you have more than one job, attach a separate page with information about additional employers. Cocupation Include part-time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Employer's name Employer's address	information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Employment status Cocupation Truck Driver Cottage Inn Distribution Inc. Employer's address or homemaker, if it applies. Employer's address or homemaker, if it applies.	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,250.00 3,640.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 4. 3,640.00 3,250.00

Case number (if known)

21-48251-mar

				For Debtor 1			ebtor 2 or ling spouse	
	Сору	line 4 here	4.	\$	3,640.00	\$	3,250.00	
5.	Lista	all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	655.00	\$	585.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	1,000.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	- \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,655.00	\$	585.00	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,985.00	\$	2,665.00	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	- \$	0.00	
9.	Adda	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	0. \$		1,985.00 + \$	2,66	5.00 = \$ 4,650.	00
	Add t	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule of de contributions from an unmarried partner, members of your household, your of friends or relatives. On include any amounts already included in lines 2-10 or amounts that are not a dify:	depen					00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 4,650.	00
13.	Do yo	ou expect an increase or decrease within the year after you file this form?	•				Combined monthly incom	е
		No.						
		Yes. Explain:						

Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	Carl Augusti	ine			Ch	eck if this is:	
							An amended filing	
	otor 2	Cara August	ine				A supplement show 13 expenses as of	ving postpetition chapter
(Spc	ouse, if filing)						15 expenses as or	the following date.
Unit	ed States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	SAN		MM / DD / YYYY	
Cas	e number 2	1-48251-mar						
(If kı	nown)							
Of	fficial Fo	rm 106J						
		J: Your I	Evnor	1606				12/15
				ISCS . If two married people ar	e filing together be	oth are en	ually responsible fo	
info	ormation. If m	nore space is ne nore space is ne n). Answer ever	eded, atta	ch another sheet to this	form. On the top of	any addi	tional pages, write	our name and case
Par	t 1: Desc	ribe Your House	hold					
1.	Is this a join	nt case?						
	☐ No. Go to	o line 2.						
	Yes. Doe	es Debtor 2 live i	in a separ	ate household?				
		lo						
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	tho			Daughter (coll	eae		□ No
	dependents				student)	-9-	17	Yes
								□ No
					Son (college s	tudent)	20	Yes
								□ No
								Yes
								□ No
3.	Do your exi	penses include	_					☐ Yes
٥.	expenses of	f people other the	han $_{\square}$	No Yes				
	yourself an	d your depende	nts? ⊔	res				
		nate Your Ongoin						
exp		a date after the b		uptcy filing date unless y y is filed. If this is a supp				
Incl	lude expense	es paid for with r	non-cash	government assistance i	f vou know			
the	value of suc	h assistance and	d have inc	luded it on Schedule I: \	our Income		Value ave	
(Off	ficial Form 10	D6I.)					Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgage	e 4.	\$	795.00
	. ,	ded in line 4:						
						4 -	Φ.	0.00
		estate taxes erty, homeowner's	s or renter	's insurance		4a. 4b.	·	0.00 0.00
				ipkeep expenses		4c.		50.00
		owner's associat				4d.	\$	0.00
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

Official Form 106J Schedule J: Your Expenses 21-48251-mar Doc 10 Filed 10/28/21 Entered 10/28/21 08:23:32 Page 34 of 43

	tor 1 Carl Aug tor 2 Cara Au		Case num	ber (if known)	21-48251-mar
•	l Itilitia a				
6.	Utilities: 6a. Electricity	, heat, natural gas	6a.	\$	314.00
	,	wer, garbage collection	6b.	*	15.00
	-	e, cell phone, Internet, satellite, and cable services	6c.		500.00
	6d. Other. Sp		6d.	· -	0.00
7.		ekeeping supplies	7.	·	860.00
8.		children's education costs	8.	\$	200.00
9.	Clothing, laund	ry, and dry cleaning	9.	\$	110.00
10.	_	products and services	10.	\$	100.00
11.	Medical and de	ntal expenses	11.	\$	65.00
12.	Transportation	Include gas, maintenance, bus or train fare.			***
	Do not include c		12.	·	410.00
		clubs, recreation, newspapers, magazines, and books	13.	· -	167.00
		ributions and religious donations	14.	\$	0.00
15.	Insurance.	and the second s			
	15a. Life insura	nsurance deducted from your pay or included in lines 4 or 20.	15a.	¢	0.00
	15b. Health ins		15a. 15b.	· -	0.00
	15c. Vehicle in		15b.	· -	480.00
	15d. Other insu		15d.	·	0.00
16		nclude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
10.	Specify:	iolade taxes assasted from your pay of moladed in into 4 of 26.	16.	\$	0.00
17.	Installment or l	ease payments:			
		ents for Vehicle 1	17a.	\$	259.00
	17b. Car paym	ents for Vehicle 2	17b.	\$	150.00
	17c. Other. Sp	ecify:	17c.	\$	0.00
	17d. Other. Sp	ecify:	17d.	\$	0.00
18.		of alimony, maintenance, and support that you did not report a		•	0.00
4.0	deducted from	your pay on line 5, Schedule I, Your Income (Official Form 106)). ^{18.}	· ·	
19.		s you make to support others who do not live with you.	40	\$	0.00
20	Specify:	erty expenses not included in lines 4 or 5 of this form or on Sc.	19.	ur Incomo	
20.		s on other property	20a.		0.00
	20b. Real estat	,	20b.	· -	0.00
		homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.		0.00
		er's association or condominium dues	20e.	·	0.00
21.	Other: Specify:	Cigarettes	21.	*	100.00
	Pet	Organication		+\$	75.00
					70.00
22.		monthly expenses			
	22a. Add lines 4	3		\$	4,650.00
	22b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
	22c. Add line 22	a and 22b. The result is your monthly expenses.		\$	4,650.00
23	Calculate your	monthly net income.			
20.	-	12 (your combined monthly income) from Schedule I.	23a.	\$	4,650.00
		r monthly expenses from line 22c above.	23b.		4,650.00
		The first of the f	_00.		-,000.00
		our monthly expenses from your monthly income. is your monthly net income.	23c.	\$	0.00
24.	For example, do you modification to the No.	an increase or decrease in your expenses within the year after ou expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?			ease or decrease because of a
	☐ Yes.	Explain here:			

Official Form 106J Schedule J: Your Expenses 21-48251-mar Doc 10 Filed 10/28/21 Entered 10/28/21 08:23:32 Page 35 of 43

Fill in this info				
Debtor 1	Carl Augustine			
	First Name	Middle Name	Last Name	
Debtor 2	Cara Augustine			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN	
Case number	21-48251-mar			
(if known)	21 70201 IIIdi			Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Di	id you pay or agree to pay someone who is N	T an attorney to help you fill out bankruptcy forms?	
	No		
	Yes. Name of person	Attach Bankruptcy Petition Pre Declaration, and Signature (Off	
	nder penalty of perjury, I declare that I have re at they are true and correct.	d the summary and schedules filed with this declaration and	
X	/s/ Carl Augustine	X /s/ Cara Augustine	
X	/s/ Carl Augustine Carl Augustine	X /s/ Cara Augustine Cara Augustine	
X			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in	this infor	mation to identify you	case:			
Debto	r 1	Carl Augustine First Name	Middle Name	Last Name		
Debto	r 2	Cara Augustine	Wildale Harrie	Edot Name		
(Spouse	e if, filing)	First Name	Middle Name	Last Name		
United	d States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case	number	21-48251-mar				
(if know	n)				_	heck if this is an mended filing
Stat	ement	and accurate as possi		are filing together, both are	ankruptcy equally responsible for sup	
	er (if know	n). Answer every que	stion.		y additional pages, write you	ii name and case
Part 1 1. W		Details About Your Ma	rital Status and Where You	Lived Before		
 •	Married	Ė	.			
2. D	uring the	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No ■ Yes. Li	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
-		•	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part 2	Expla	in the Sources of You	r Income			
Fi	ill in the tot	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
□		Il in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$34,628.00	■ Wages, commissions, bonuses, tips	\$14,600.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known) 21-48251-mar

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
or last caler January 1 to	ndar year: December 3	31, 2020)	■ Wages, commissions, bonuses, tips	\$34,757.00	■ Wages, commissions, bonuses, tips	\$24,616.00
			☐ Operating a business		☐ Operating a business	
	dar year bef December 3		■ Wages, commissions, bonuses, tips	\$39,213.00	■ Wages, commissions, bonuses, tips	\$37,358.00
			☐ Operating a business		☐ Operating a business	
winnings. List each No	If you are filing	ng a joint ca	pensions; rental income; interse and you have income that your from each source separa	you received together, list it o	•	nd gambling and lotter
			Dobtor 1		Dobtor 2	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	y 1 of curren filed for ban			\$0.00	IRA disbursement	\$1,500.0
or last caler January 1 to	ndar year: December 3	31, 2020)		\$0.00	IRA disbursement	\$2,333.0
				\$0.00	UIA	\$15,453.0
	dar year bef December 3		Lottery winnings	\$2,800.00	IRA disbursement	\$0.0
Are eithe	r Debtor 1's	or Debtor 2	Made Before You Filed for	r debts?		
□ No.			Debtor 2 has primarily consular personal, family, or househo		s are defined in 11 U.S.C. § 10	11(8) as "incurred by a
		,	ore you filed for bankruptcy, di	id you pay any creditor a tota	I of \$6,825* or more?	
	□ No.	Go to line 7				
	Yes	paid that co	editor. Do not include paymer payments to an attorney for t	nts for domestic support oblights bankruptcy case.	n one or more payments and to pations, such as child support a or after the date of adjustmen	and alimony. Also, do
■ Yes.	Debtor 1 o	r Debtor 2 o	or both have primarily consumore you filed for bankruptcy, di	umer debts.	,	ι.
	□ No.	•		, ,		
	□ No. ■ Yes	Go to line 7		id a total of \$600 or more one	d the total amount you paid tha	at creditor. Do not
	- res				ort and alimony. Also, do not	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

attorney for this bankruptcy case.

Debtor 1 Carl Augustine
Debtor 2 Cara Augustine Case number (if known) 21-48251-mar

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	Shellpoint Attn: Bankruptcy Po Box 10826 Greenville, SC 29603	8/2021, 9/2021, 10/2021, \$795.00 monthly	\$2,385.00	\$99,065.00	■ Mortgage □ Car □ Credit Ca □ Loan Re □ Suppliers □ Other	ard
	University of Michigan CU Attn: Bankruptcy 340 E Huron St, Ste 100 Ann Arbor, MI 48104	8/2021, 9/2021, 10/2021,\$259.00 monthly	\$777.00	\$8,770.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Re ☐ Suppliers ☐ Other	ard payment s or vendors
7.	Within 1 year before you filed for bankrupi Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony. No Yes. List all payments to an insider.	artners; relatives of any ger n control, or owner of 20% o	neral partners; partne or more of their voting	rships of which yo securities; and ar	u are a genera ny managing a	al partner; corporations agent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or community in the second seco		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures	•			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, fo	oreclosed, garnis	hed, attached	d, seized, or levied?
	No. Go to line 11. Yes Fill in the information below					
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property

	otor 1 otor 2	Carl Augustine Cara Augustine			Case number (if kno	21-48251-	mar
11.	accol	n 90 days before you filed for bank unts or refuse to make a payment b No Yes. Fill in the details.		did any creditor, including a bank o you owed a debt?	or financial institut	tion, set off any a	amounts from your
		litor Name and Address	De	scribe the action the creditor took		ate action was ken	Amount
12.	court	-appointed receiver, a custodian, o		as any of your property in the posser official?	ession of an assiç	gnee for the bend	efit of creditors, a
	_	No Yes					
Par	t 5:	List Certain Gifts and Contribution	ıs				
13.	I	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	uptcy, o	did you give any gifts with a total va	alue of more than	\$600 per person	?
	Gifts per p	s with a total value of more than \$60 person		Describe the gifts		ates you gave e gifts	Value
		on to Whom You Gave the Gift and ress:					
14.	I	n 2 years before you filed for bankr No Yes. Fill in the details for each gift or c		did you give any gifts or contributio	ns with a total val	ue of more than	\$600 to any charity?
	more Char	s or contributions to charities that the than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod		Describe what you contributed		ates you ontributed	Value
Par	t 6:	List Certain Losses					
15.	Withi		ptcy or	since you filed for bankruptcy, did	you lose anything	j because of the	ft, fire, other disaster,
	□ 1	No					
		Yes. Fill in the details.	_				
		cribe the property you lost and the loss occurred	Include	ibe any insurance coverage for the lead the amount that insurance has paid. The chairs on line 33 of Schedule A/B:	List pending lo	ate of your ss	Value of property lost
		fire damage	n/a	iso significant interest of solitogate 192.	. I Toporty.		\$0.00
Par	t 7:	List Certain Payments or Transfer	s				
16.	Includ	ulted about seeking bankruptcy or	prepari	id you or anyone else acting on you ng a bankruptcy petition? s, or credit counseling agencies for se			rty to anyone you
		res. Fill in the details.		Description and value of any prop	nerty D:	ate navment	Amount of
	Addı Ema		⁄ou	transferred	or	ate payment transfer was ade	payment
	Law 2384	go & Associates - The Bankrup 43 Joy Road rborn Heights, MI 48127	tcy		9/	30/2021	\$100.00

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.									
	No									
	☐ Yes. Fill in the details.									
	Person Who Was Paid Address	Description and va transferred	llue of any prope	erty	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your businclude both outright transfers and transfers made	iness or financial affai	rs?							
	Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property include gifts and transfers that you have already listed on this statement. No									
	Yes. Fill in the details.									
	Person Who Received Transfer Address	Description and va property transferre			iny property or received or debts change	Date transfer was made				
	Person's relationship to you									
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No									
	☐ Yes. Fill in the details.									
	Name of trust	Description and va	llue of the prope	erty transferre	ed	Date Transfer was made				
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stor	age Units						
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.									
	Yes. Fill in the details.									
		ast 4 digits of ccount number	Type of accoun instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No									
	Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		escribe the o	contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	No									
	Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, Strate and ZIP Code)		escribe the o	contents	Do you still have it?				

Official Form 107

Debtor 1 Carl Augustine Debtor 2 Cara Augustine

Case number (if known) 21-48251-mar

ı aı	t 9: Identify Property You Hold or Control for S	Someone Else								
23.	Do you hold or control any property that someor for someone.	ne else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust						
	■ No									
	Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	t 10: Give Details About Environmental Information	tion								
For	the purpose of Part 10, the following definitions a	apply:								
	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	— ·							
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s	sites.								
	Hazardous material means anything an environn hazardous material, pollutant, contaminant, or si		s waste, hazardous substance, toxic	substance,						
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n they occurred.							
24.	Has any governmental unit notified you that you	may be liable or potentially liable	e under or in violation of an environm	ental law?						
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	ironmental law? Include settlements	and orders.						
	■ No □ Yes. Fill in the details.									
	☐ Yes. Fill in the details. Case Title	Court or agency	Nature of the case	Status of the						
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	case						
Par	t 11: Give Details About Your Business or Conn	nections to Any Business								
	Within 4 years before you filed for bankruptcy, d		ny of the following connections to an	v husiness?						
21.		•	,	y business:						
	 □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) 									
	☐ A partner in a partnership		···················/							
	☐ An officer, director, or managing executi	ve of a cornoration								
	☐ An owner of at least 5% of the voting or e									

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Carl Augustine otor 2 Cara Augustine		Case number (if known)	21-48251-mar
	No. None of the above applies. Go to FYes. Check all that apply above and fill		ss.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Do not include S	Social Security number or ITIN.
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statemen	t to anyone about your I	ousiness? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
I ha	t 12: Sign Below we read the answers on this <i>Statement of Fin</i> true and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property	, or obtaining money or	
	Carl Augustine	/s/ Cara Augustine		
	rl Augustine nature of Debtor 1	Cara Augustine Signature of Debtor 2		
Dat	October 19, 2021	Date October 19, 2021		
Did ■ N		ent of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is not	an attorney to help you fill out bank	ruptcy forms?	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).